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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	10/047,060
Filing Date	January 14, 2002
First Named Inventor	Anand R. BAICHWAL
Art Unit	1615
Examiner Name	Carlos A. AZPURU
Attorney Docket Number	540.1004CON2

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR §1.114**a. ☐ Previously submittedi. ☐ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____iii. ☐ Other _____b. ☒ Enclosedi. ☒ Amendment/Replyiii. ☒ Information Disclosure Statement (IDS)ii. ☐ Affidavit(s)/Declaration(s) iv. ☒ Other Petition for Extension of Time2. **Miscellaneous**a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months (Period of suspension shall not exceed 3 months; Fee under 37 CFR §1.17(i) required)b. ☐ Other _____3. **Fees** The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, toDeposit Account No. 50-0552i. ☒ RCE fee required under 37 CFR §1.17(e)

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ii. ☒ Extension of time fee (37 CFR §§1.136 and 1.17)

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iii. ☐ Other _____b. ☒ Check in the amount of \$ 1160.00 enclosedc. ☐ Payment by credit card (Form PTO-2038 enclosed)**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print / Type)

Leslye B. Davidson

Registration No. (Attorney / Agent)

38,854

Signature

Date

January 30, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark

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Randolph K. McQueen

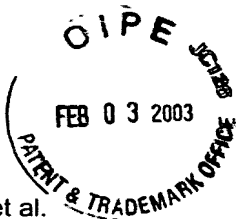
Signature

Date

January 30, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

ASSISTANT COMMISSIONER FOR PATENTS
Washington, DC 20231



Docket No.: 540.1004CON2

Date: January 30, 2003

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In re application of: Anand R. BAICHWAL, et al.

Serial No.: 10/047,060

Filed: January 14, 2002

For: CONTROLLED RELEASE INSUFFLATION CARRIER FOR MEDICATION

Sir:

Transmitted herewith is a **Response** in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
- ☒ No fee for additional claims is required.
- ☐ A filing fee for additional claims calculated as shown below, is required:

FOR:	(Col. 1)		(Col. 2)		SMALL ENTITY		OR	LARGE ENTITY	
	REMAINING	HIGHEST	PREVIOUSLY	PRESENT	RATE	FEE		RATE	FEE
	AFTER	PAID FOR	AMENDMENT	EXTRA					
TOTAL CLAIMS	18*	Minus 20**	=	0x \$	9	\$		x \$ 18	\$ 0
INDEP. CLAIMS	2*	Minus 3**	=	0x \$	39	\$		x \$ 78	\$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIMS					\$ 30	\$		+ \$260	\$

TOTAL: \$ OR TOTAL: \$ 0.00

* If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☒ Also transmitted herewith are:☒ Petition for extension under 37 C.F.R. 1.136☒ Other: - **Information Disclosure Statement with accompanying references and Request for Continued Examination**☒ Check(s) in the amount of **\$1160.00** is attached to cover:☐ Filing fee for additional claims under 37 C.F.R. 1.16☒ Petition fee for extension under 37 C.F.R. 1.136☒ Other: - **Request for Continued Examination (RCE) Transmittal**☒ The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.☒ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.☒ Any patent application processing fees under 37 C.F.R. 1.17.☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

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(212) 736-1940.

I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with the United States Postal Service with sufficient postage as "first class mail" in an envelope addressed to "Assistant Commissioner for Patents, Washington, D.C. 20231" on January 30, 2003.
DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: Randolph K. McQueen
Randolph K. McQueen